



CENTRON SECURITY SERVICES

## Daily Security Report

Client No. 2036		Client Name OH MATERIALS				Location 1002 OSWEGO UTICA NY		Date 6/17/87					
Facility Equipment	Detex Clock	Weapon No.	Hoister	Nightstick	Raincoat	Flashlight	Other 2 GATE KEYS - LOG BOOK						
Officers: Fully explain all items marked "Yes" with time and all detail. For additional space use reverse side and attach incident reports.		Officer - Day Shift (Name) GEORGE, JOHN D				Officer - Swing Shift (Name) Brad M Mallace		Officer - Grave Shift (Name) Dick Kokoszki					
Shift		Shift		Shift		Shift		Shift					
Began 8 AM-PM		Ended 4 AM-PM		Began 04 AM-PM		Ended 12 AM-PM		Began 12 AM-PM		Ended 8 AM-PM			
Observations or actions taken		Yes	No	Explanation		Yes	No	Explanation		Yes	No	Explanation	
Rounds or stations missed			✓				✓				✓		
Unlocked doors, gates or windows			✓				✓				✓		
Unlocked vaults or safes			✓				✓				✓		
Fire-smoke-or hazards			✓				✓				✓		
1. Extinguishers missing or defective			✓				✓				✓		
2. Sprinkler system defective			✓				✓				✓		
3. Fire doors or exits blocked			✓				✓				✓		
4. Rubbish accumulation			✓				✓				✓		
5. Motors running			✓				✓				✓		
6. Lights left burning			✓				✓				✓	LIGHTS OUT 0515	
Injury hazards			✓				✓				✓		
Visitors		✓		D. O'NEIL				OHM supply truck		✓		OHM 2 EPA MEN ON SITE	
Trespassing										✓			
Violation of company rules										✓			
Remarks OHM supply truck arrives at 1930 called Mr. Street, he sent two men to unload the vehicle. all OHM personnel off site 9/5 at 2130 hrs													

IMPORTANT: If you were ill or injured please explain on the reverse side of this form and call your supervisor before leaving this post.

1. Were you injured during this tour?	Day Shift	1	Yes	No	2	Yes	No	3	Swing Shift	1	Yes	No	2	Yes	No	3	Grave Shift	1	Yes	No	2	Yes	No	3	
2. Did you suffer any illness?	Day Shift	1	Yes	No	2	Yes	No	3	Swing Shift	1	Yes	No	2	Yes	No	3	Grave Shift	1	Yes	No	2	Yes	No	3	
3. Have you reported all accidents coming to your attention?	Day Shift	1	Yes	No	2	Yes	No	3	Swing Shift	1	Yes	No	2	Yes	No	3	Grave Shift	1	Yes	No	2	Yes	No	3	
Signatures		1		2		3		1		2		3		1		2		3		1		2		3	
Signatures		1		2		3		1		2		3		1		2		3		1		2		3	
Signatures		1		2		3		1		2		3		1		2		3		1		2		3	

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